

POSITION	INITIALS	ID NO.	DATE
TERMINATION	EL		8-28-01
CLASSIFIER		12	9/1/01
QUALITY REVIEW	AM	917	08-20-01
FORMALITY REVIEW			

## INDEX OF CLAIMS

.....	Rejected	N	.....	Non-elected
.....	Allowed	I	.....	Interference
(Through numeral)...	Canceled	A	.....	Appeal
.....	Restricted	O	.....	Objected

[illegible]

Claim		Date					
Final	Original						
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Claim		Date
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